	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate schedule(for each category of th Detailed Summary Page	(s) (c	DR LINE NUMBER: PAGE 59 OF 61 heck only one) 17
	ny information copied from such Reports and Statements me for commercial purposes, other than using the name and			rson for the purpose of soliciting contributions
\rangle	NAME OF COMMITTEE (In Full) Bonamici for Congress			
۹.	Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee Mailing Address 430 S. Capitol St SE 2nd Floor			Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City State Washington DC Purpose of Disbursement Transfer to DCCC Candidate Name Democratic Congressional Campaign Co Office Sought: House Disbursement For Senate Primary President Other (s	cat cat cat cat cat cat cat cat cat cat	008 tegory/ Type	Amount of Each Disbursement this Period 18750.00 Transaction ID: EX082913104448De
3.	Mailing Address			Date of Disbursement
	City State Purpose of Disbursement Candidate Name Office Sought: House Senate Primary President State: District:	General	tegory/ Type	Amount of Each Disbursement this Period
Э.	Full Name (Last, First, Middle Initial) Mailing Address			Date of Disbursement
	City State Zi Purpose of Disbursement Candidate Name Office Sought: House Senate Primary President State: District:	: General	tegory/ Type	Amount of Each Disbursement this Period
S	SUBTOTAL of Disbursements This Page (optional)			18750.00

TOTAL This Period (last page this line number only).....

18750.00